PTOSB701 (09-04)
Approved for use through 07/51/2008, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
a pollection of information unless it contains a unlet of the

	Under the Paperwork Reduction	n Act of 1995, no p	ersons are required to res	pond to a collection of infor	mation unless	it contains a valid	OMB control number.	
			Attorney Docket					
	DECLARATION		JTY OR	Number				
	DESIGN			First Named Invento	r			
		PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN				
	(37 0			Application Number				
	Declaration CO	Declaration Submitted after Initial Filing (surcharge		Filing Date				
	With Initial		(surcharge	Art Unit				
	Filing	(37 Ci requir	FR 1.16 (e)) red)	Examiner Name		·		
	hereby declare that:							
	Each inventor's residence, m	ch inventor's residence, mailing address, and citizenship are as stated below next to their name.						
٠.,	I believe the inventor(s) name which a patent is sought on ti	ed below to be	the original and first	inventor(s) of the sub	ject matter	which is clain	ned and for	
.)	DECKING TOOL				····	**		
							į	
							·	
	the specification of which		(Title of the	Invention)				
,	is attached hereto							
		OR						
was filed on (MM/DD/YYYY) 4 November 2004 as United States Application Number or PCT I						CT International		
	Application Number PCT/AU2004/001528 and was amended on (MM/DD/YYYY) (if applicable).							
- 1	I hereby state that I have review	wed and unde		•	specifical	ion including	• • •	
	amended by any amendment	specifically refe	erred to above.		- оросинск	aon, mooding	one cataline, as	
	I acknowledge the duty to di	acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for						
	continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
4	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one							
- 1	country other than the United	States of Ame	rica, listed below and	have also identified	pelow by	wnich designa checking the I	ted at least one	
ŀ	application for patent, inventor	r's or plant bree	eder's rights certifica	te(s), or any PCT into	mational a	application have	ring a filing date	
L	before that of the application of	n which priorit	y is claimed.					
	Prior Foreign Application Number(s)	Country	Foreign Filing (MM/DD/YYY			Certified Co	opy Attached?	
Ī	2003906239	Austrelia	13 November 2003	ſ			No ✓	
	60/527805	USA	8 December 2003	i l				
	2004904030	Australia	21 July 2004	1	i			
	PCT/AU2004/001528	PCT	4 November 2004	ז ן	Ħ			
İ	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
_	Page 1 of 21							

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DN NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

PTC/SSI01 (09-04) Approved for use through 07/31/2008. OMB 0851-0032 radamark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information uniters it contains a valid OMB control number DECLARATION — Utility or Design Patent Application Direct all The address Correspondence correspondence to: 47649 associated with address below Customer Number: Name Address City State ZIP Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Mark Behnecke Behnecke Inventor's Signature Date 18 Residence: City State Country Citizenship Mount Wartha Victoria Austrelia Australian Malling Address 37-39 Fairbaim Avenue, Mount Martha VIC 3934, Australia City Zip Country Mount Martha 3934 Australia NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Symons Inventor's Signature 2006 UN W

Under the Demonstrate Partiretion Act of 1005		U.S. F	Patent and Trademark Off	PTO/SE/02 use 9yough 07/31/2006, OMB 0 loc U.S. DEPARTMENT OF COI		
Under the Peperwork Reduction Act of 1995 DECLARATIO		ADDITIO	DNAL INVENTOR	(S)		
						
Name of Additional Joint Invento	r, if any:	A pe	A petition has been filed for this unsigned inventor			
Given Name (first and middi	e (if any))	Family Mar	me or Surname			
Inventor's Name Bekos			Bakos			
				15ate 20/4/0		
Dromana Victoria			Australia	Australian		
Residence: City	State		Country	Citizenship		
Mating Address						
Dromana Victoria			3936	Australia		
City	State		Zip	Country		
Name of Additional Joint Inventor	A pe	A petition has been filed for this unsigned inventor				
Given Name (first and middle	e (if any))		Family Nan	ne or Surname		
Inventor's & ham h	· · · · · · · · · · · · · · · · · · ·		Date 20-4-0			
				İ		
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State		Zip	Country		
Name of Additional Joint Inventor	t inventor, if any: A petition has been filed for this u					
Given Name (first and middle (if any)) Family Name or Surname						
Inventor's Signature						
Residence: City	State	<u>. </u>	Country	Cifizenship		
Mailing Address						
City	State		Zip	Country		
This collection of information is required by 35 U.S.		3. The information is		in a handle by the nubbe which i		

(and by the USPTO to process) an application. Confidentially a governed by 39 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form endor suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PTC/SB/81 (11-04)
Approved for use through 11/SC/2005, OMS 0631-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COLUMENCE

4

Under the Paperwork Reduction Act of 1995, no persons are n	U.S. Patent and Ti Quited to respond to a collection of info	rademark Office; U.S. DEPARTMENT OF COMMERCE
	Application number	Filed Herewith
POWER OF ATTORNEY	Filing Date	Filed Herewith
and	First Named Inventor	
CORRESPONDENCE ADDRESS	Title	
INDICATION FORM	Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.								
I hereby appoint:								
	od with the Customer Number:	470	649					
OR	<u> </u>							
Practitioner(s) named	below:							
	Name			Registration Number				
Kenneth M. Fagin	Kenneth M. Fagin			37,615				
		ļ						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Par Trademark Office connected therewith.								
Please recognize or change to	he correspondence address for the above	-identified applic	cation to:					
The address associated with the above-mentioned Customer Number:								
The address associated with Customer Number:								
OR	war obduller Number.							
Individual Name	Firm or Individual Name							
Address	Address							
City		1 04-4- 1		\				
Country	 	State		Zip				
Telephone		Fax						
I am the: Applicant/Inventor. Assignee of record of the entire Interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTC/SB/96)								
	SIGNATURE of Applicant	or Assignee o	f Record		: <i>/</i>			
Signature	las		0	ate [8]	4/06			
Name Mark Be	· · · · · · · · · · · · · · · · · · ·	Tel	ephone	7				
	. BBS Deck King Tool Pty Ltd							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
"Total of 1 forms are submitted.								

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 mirrutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any complete is not in the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer.
U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and salect option 2.